

TOWN OF MILLVILLE

36404 Club House Road, Millville, DE 19967 TEL (302) 539-0449 FAX (302) 539-0879 www.millville.delaware.gov

Date Received:	
APPLICATION REVIEW FEE:	
ESCROW FEE:	
SUBDIVISION FEE:	

SUBDIVISION APPLICATION

 \square Check if this application is a REVISION to the plan \square MINOR or \square MAJOR

SUBMIT THE FOLLOWING WITH API	PLICATION	
☐ Four (4) Copies of Proposed	Plans Copy of Deed	☐ Application Review Fee & Escrow
PROPERTY OWNER & APPLICANT IN	IFORMATION	
Property Owner Name		
POC		
Mailing Address		
Telephone	Prop	. Owner Email
Applicant/Company's Name •Consent of Property Owner Attached.		
POC		
Mailing Address		
Telephone	Appl	icant Email
PROPERTY INFORMATION		
TMP#		
Property Location		
Property Size/Dimensions		
Current Zoning District		Proposed Zoning (If Applicable)
Proposed Project Description		
SUBDIVISION APPLICATION FEE (Submit with Application) Minor \$450		
SUBDIVISION FEE (\$450 per Lot/Unit/Site - 20% Due with Application)		Lots/Units/Sites x \$450 = \$
		20% \$ Check# Date
		Remaining 80% \$ (Due at the Final Plan Approval)
ESCROW Additional fees may be requested by the Town should the escrow funds be depleted. Fees are used to cover costs incurred by the Town's engineering consultants and attorney to perform this review and other necessary services to assure that the project meets the requirements and best interest of the Town. PLEASE NOTE ALL CORRESPONDENCE OVER ESCROW ISSUES WILL BE VIA EMAIL.		☐ Minor \$2,500 Check # Date: ☐ Major \$10,000 Check # Date:
I (We) hereby apply to the Town of Millville, for a subdivision on the property described above. I (We) certify that all the information and attached documentation provided in this application is correct.		
Current Owner/Applic	cant Date	Current Owner/Applicant Date
TOWN USE ONLY		
Approval Date: Denied Date:		Denied Date:
Administrative Official:		